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Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)	<u></u>		
Case number (if known)	Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12	Г	Check if this is an
	Chapter 13	,	amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
□ Your full name	Robert	
	First name	First name
Write the name that is on		
your government-issued picture identification (for example, your driver's	Middle name	Middle name
	Wheeler	
license or passport	Last name	Last name
Bring your picture		
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
meeting with the trustee.		
All other names you	First a see	First same
have used in the last	First name	First name
8 years	Middle name	Middle name
Include your married or	Middle Harie	Middle Harrie
maiden names.	Last name	Last name
	Zaot Harrio	Lastinanio
	First name	First name
	Middle name	Middle name
	Last name	Last name
. Only the last 4 digits	NOW NO.	VIV. 102
of your Social	XXX - XX- 4969	XXX - XX-
Security number or federal Individual	OR	OR
Taxpayer	9 xx - xx-	9 xx - xx-
Identification number		
(ITIN)		

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Debtor 1 Robert First Name	Wheeler Middle Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years Include trade names and	Business name	Business name
doing business as names	EIN	EIN
	EIN	EIN
5. Where you live	7325 S. Emerald	If Debtor 2 lives at a different address:
	Number Street	Number Street
	Chicago Illinois 60621 City State Zip Code	City State Zip Code
	Cook County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. 7324 S. Emerald Ave. Apt. 1	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	Chicago Illinois 60621 City State Zip Code	City State Zip Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
	Thave around reason. Explain. (See 20 S.S.S. 33 1456.)	Thave arother reason. Explain. (eee 20 c.c.o. gg 1400.)

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Debtor 1 Robert		Wheeler	Case number (if kno	own)
First Name	Middle Name	Last Name		
Part 2: Tell the Court A	About Your Bankruptcy Ca	ase		
 The chapter of the Bankruptcy Code you are choosing to file under 		description of each, see <i>Notice Rec</i> 0)). Also, go to the top of page 1 an		
8. How you will pay the fee	more details about cashier's check, or may pay with a cred Individuals to Pay I request that my finding may, but is not the official poverty you choose this op	how you may pay. Typically, if y money order. If your attorney is dit card or check with a pre-print fee in installments. If you choos Your Filing Fee in Installments (of fee be waived (You may request not required to, waive your fee, and line that applies to your family significant.)	ou are paying the submitting your ted address. te this option, sig Official Form 103 t this option only and may do so only size and you are to	the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A.). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9. Have you filed for bankruptcy within the last 8 years?	No. Yes. District District District	When When When	MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a busines partner, or by an affiliate?	Yes. Debtor District	<u>W</u> her <u>W</u> her	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11. Do you rent your residence?	✓ No. Go to	ord obtained an eviction judgment and line 12. Suit <i>Initial Statement About an Eviction</i> beankruptcy petition.		st You (Form 101A) and file it with

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Robert Wheeler Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Robert First Name		eeler Case num	ber (if known)
	estions for Reporting Purposes	Ivairie	
16. What kind of debts do you have?	16a. Are your debts primarily co "incurred by an individual pr No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bu	rimarily for a personal, family, or a personal per	s are debts that you incurred to obtain ion of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund No.		cempt property is excluded and administrative ounsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 r	ion \$1,000,000,001-\$10 billion llion \$10,000,000,001-\$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	ion \$1,000,000,001-\$10 billion Ilion \$10,000,000,001-\$50 billion
Part 7: Sign Below	Lhave evenined this potition, and	I dealare under penalty of per	ury that the information provided is true and
For you	correct. If I have chosen to file under Chap of title 11, United States Code. I under Chapter 7. If no attorney represents me and I out this document, I have obtaine I request relief in accordance with I understand making a false stater	oter 7, I am aware that I may prinderstand the relief available did not pay or agree to pay so d and read the notice required the chapter of title 11, United ment, concealing property, or de can result in fines up to \$25	oceed, if eligible, under Chapter 7, 11,12, or 13 under each chapter, and I choose to proceed meone who is not an attorney to help me fill
	/s/ Robert Wheeler Signature of Debtor 1		gnature of Debtor 2
	Executed on 5/15/2019 MM / DD / Y	E)	xecuted on

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Debtor 1 Robert		Wheeler	Case number (if k	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12,	or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. § 3	42(b) and, in a case in w	which § 707(b)(4)(D) applies, certify that I
represented by an			. ,	ules filed with the petition is incorrect.
attorney, you do not	· ·	, ,		•
need to file this page.	/s/ Ryan P Crotty		Date	5/15/2019
	Signature of Attorney	for Debtor	M	M / DD / YYYY
	Ryan P Crotty			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	enue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3127547070	Email address	rcrotty@semradlaw.com
	6312602		Illinois	
	Bar number		State	

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Robert		Wheeler
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court for the:	Northern	District of Illinois
		_	(State)
Case number (If known)			

П	Check if this is an
_	amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	Ψ0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$1,140.00
1c. Copy line 63, Total of all property on Schedule A/B	\$1,140.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	¢0.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$21,774.56
Your total liabilities	\$21,774.56
art 3: Summarize Your Income and Expenses	
. Schedule I: Your Income (Official Form 106I)	
,	\$2,704.93
Copy your combined monthly income from line 12 of Schedule I	
Copy your combined monthly income from line 12 of Schedule I	\$2,710.00

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Deb	tor 1 Rol			Wheeler	Case number (if known)						
		st Name	Middle Name	Last Name	_						
Part	4: An	swer These Question	ns for Administrati	ve and Statistical Recor	ds						
6. A	re you fi	iling for bankruptcy und	er Chapters 7, 11, or	13?							
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.										
Ŀ	Yes.										
7. W	/hat kind	d of debt do you have?									
E	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.										
		debts are not primarily form to the court with you		u have nothing to report on th	is part of the form. Check this box and subr	nit					
		e Statement of Your Cur 2A-1 Line 11; OR, Form 1		e: Copy your total current mon rm 122C-1 Line 14.	othly income from Official	\$3,294.88					
9.	Copy th	copy the following special categories of claims from Part 4, line 6 of Schedule E/F:									
	From Part 4 on Schedule E/F, copy the following:			Total claim							
	9a. Dor	nestic support obligations	(Copy line 6a.)		\$0.00						
	9b. Tax	ses and certain other debts	you owe the governm	nent. (Copy line 6b.)	\$0.00						
	9c. Clai	ms for death or personal i	njury while you were in	ntoxicated. (Copy line 6c.)	\$0.00						
	9d. Stu	dent loans. (Copy line 6f.)			\$0.00						
		igations arising out of a sectaims. (Copy line 6g.)	eparation agreement or	divorce that you did not repo	rt as \$0.00						
	9f. Deb	ts to pension or profit-sha	ring plans, and other s	similar debts. (Copy line 6h.)	\$0.00						

\$0.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	information to identify your o	ase:					
Debtor 1	Robert			Wheeler			
Debtor 2	First Name	Middle N	ame	Last Name			
(Spouse, if fi	ling) First Name	Middle N	ame	Last Name			
United Sta	ates Bankruptcy Court for the:	Northern		District of Illinois			
Case num	ber			(State)			
Officia	al Form 106A/B						Check if this is an amended filing
Sche	dule A/B: Prope	erty					12/1
category v responsibl write your	where you think it fits best. le for supplying correct infor name and case number (if l	Be as complete ar mation. If more sp known). Answer ev	nd accur pace is n very ques	et only once. If an asset fits in mor ate as possible. If two married peo eeded, attach a separate sheet to stion. ther Real Estate You Own or H	ple are fil this form	ing together, both a . On the top of any a	re equally
1. Do you		quitable interest i	n any res	sidence, building, land, or similar p	roperty?		
<u> </u>	No. Go to Part 2						
1.1	Yes. Where is the property? Street address, if available, or	other description	Sing	the property? Check all that apply. gle-family home blex or multi-unit building	th	e amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.
			Con Mar	dominium or cooperative		urrent value of the tire property?	Current value of the portion you own?
	Number Street City State	Zip Code		estment property eshare	in	escribe the nature o terest (such as fee s e entireties, or a life	imple, tenancy by
			one. Deb Deb Deb	s an interest in the property? Chector 1 only tor 2 only tor 1 and Debtor 2 only east one of the debtors and another	ck	Check if this is co (see instructions)	mmunity property
				nformation you wish to add about t	this item,	such as local	
If you	own or have more than one, I	iet hara:	propert	y identification number <u>:</u>			
1.2	Street address, if available, or		Sing Dup Con	the property? Check all that apply. gle-family home blex or multi-unit building idominium or cooperative nufactured or mobile home	the Ci Cu	e amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own?
	Number Street City State	Zip Code		estment property eshare	in	escribe the nature o terest (such as fee s e entireties, or a life	imple, tenancy by
			one. Deb Deb Deb At le	s an interest in the property? Chector 1 only tor 2 only tor 1 and Debtor 2 only east one of the debtors and another information you wish to add about the information you wish to add about the identification number:		(see instructions)	mmunity property

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Debtor 1			Wheeler	Case number	(if known)	
	First Name	Middle Name	Last Name			
1.3 Stre	First Name et address, if available, or other de	escription	Last Name at is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other b has an interest in the property? Co Debtor 1 only Debtor 2 only	oly.	Do not deduct secured the amount of any secu	imple, tenancy by e estate), if known.
		Oth pro	Debtor 1 and Debtor 2 only At least one of the debtors and anoth ter information you wish to add aborety identification number:	out this item,		
	the dollar value of the portion ve attached for Part 1. Write th	-	of your entries from Part 1, includir e▶	ng any entries	for pages	
Do you ow you own t	hat someone else drives. If you leans, trucks, tractors, sport utility ve	ase a vehicle, also	any vehicles, whether they are regored or report it on Schedule G: Executory Colles	•	-	
3.1	Make Model: Year:		Who has an interest in the proper one. Debtor 1 only	ty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community proinstructions)		Current value of the entire property?	Current value of the portion you own?
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a	nother	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: nims Secured by Property. Current value of the portion you own?
			instructions)	perty (See		

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	Robert First Name	Middle Name	Wheeler Last Name	Case number	er (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)	nly s and another	the amount of any secu	claims or exemptions. Pured claims on Schedule Laims Secured by Property. Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:	<u></u>	Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or		the amount of any secu	claims or exemptions. Pu ured claims on Schedule L aims Secured by Property. Current value of the portion you own?
			At least one of the debtor Check if this is communinstructions)			
		•	er recreational vehicles, other , fishing vessels, snowmobiles, i	•		
Exa	mples: Boats, trailers, motors	•		motorcycle accessori property? Check hly s and another	Do not deduct secured the amount of any secu	claims or exemptions. Pu ured claims on <i>Schedule L</i> aims Secured by Property. Current value of the portion you own?

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Household goods and furniture \$200.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... **Used Electronics** \$150.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$50.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, aold, silver No Yes. Describe... Used Costume Jewelry \$40.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$440.00 for Part 3. Write that number here

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Greendot Prepaid Card \$700.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Deb	tor 1 Robert		Wheeler	Case number (if known)	
20	First Name Government and corp	Middle Name	Last Name	struments	
20.	Negotiable instruments	include personal checks, cashie ents are those you cannot trans	ers' checks, promissory notes,	and money orders.	
	✓ No	onto are arose you carmet train	sici to comocine by digiting of	donvoining droini.	
	Yes. Give specific information about them	Issuer name:			
21	Retirement or pension	2000unts			
21.			(b), thrift savings accounts, or	other pension or profit-sharing plans	
	No ✓ Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:	Pension Plan Through Wo	ork	\$0.00
	separately.	401(k) or similar plan:	401(k) through work		\$0.00
		Pension plan:			_
		IRA:			_
		Retirement account:			_
		Keogh:			_
		Additional account:			
		Additional account:			_
22.	Your share of all unused	prepayments d deposits you have made so the with landlords, prepaid rent, put			
	✓ No		Institution name:		
	Yes	Electric:			_
		Gas:			_
		Heating oil:			
		Security deposit on rental unit	i:		
		Prepaid rent:			_
		Telephone:			_
		Water:			_
		Rented furniture:			_
00	America (America)	Other:			_
23.	No	or a periodic payment of money	to you, either for life or for a r	number of years)	
	Yes	Issuer name and description:			

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Debt	tor 1 Robert	Wheeler Case number (if kno	wn)
24.		Middle Name Last Name an education IRA, in an account in a qualified ABLE program, or under a qualified state tu	ition program.
	_	530(b)(1), 529A(b), and 529(b)(1).	
	✓ No Yes	Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.		able or future interests in property (other than anything listed in line 1), and rights or pow for your benefit	vers
	✓ No Yes. Desc	cribe	
26.		pyrights, trademarks, trade secrets, and other intellectual property	
20.		ernet domain names, websites, proceeds from royalties and licensing agreements	
	✓ No ✓ Yes. Desc	cribe	
27.		unchises, and other general intangibles illding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional li	concoc
	No No	inding permits, exclusive licenses, cooperative association moldings, liquol licenses, professional li	och ses
	Yes. Desc	cribe	
Mor	ney or proper	rty owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or proper		portion you own?
	Tax refunds ov	wed to you	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov ✓ No Yes. Give s abour	specific information ut them, including whether	portion you own? Do not deduct secured claims or exemptions. al: \$0.00
	Tax refunds ov No Yes. Give s abour you a	wed to you specific information Federa	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ov No Yes. Give s about you a and t	specific information It them, including whether already filed the returns the tax years Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and t Family suppor Examples: Past	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and t Family suppor Examples: Past	specific information It them, including whether already filed the returns the tax years Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and t Family suppor Examples: Past	specific information It them, including whether already filed the returns the tax years It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, prospecific information	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and t Family suppor Examples: Past	specific information It them, including whether already filed the returns the tax years It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, prospecific information	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 perty settlement ay: \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and t Family suppor Examples: Past	specific information at them, including whether already filed the returns the tax years It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, prospecific information Alimon Mainte Support	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 perty settlement ay: \$0.00 \$0.00 \$0.00
29.	Tax refunds ov No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s	specific information It them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 pperty settlement ay: \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds ov ✓ No ☐ Yes. Give s about you a and t Family support Examples: Past ✓ No ☐ Yes. Give s Other amount Examples: Unp	specific information at them, including whether already filed the returns the tax years rt t due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, pro specific information Alimor Mainte Suppo	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 poerty settlement ay: \$0.00 \$0.00 \$0.00 \$0.00 poerty settlement ay: \$0.00 \$0.00
29.	Tax refunds ov ✓ No ☐ Yes. Give s about you a and t Family support Examples: Past ✓ No ☐ Yes. Give s Other amount Examples: Unp	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 poerty settlement ay: \$0.00 \$0.00 \$0.00 \$0.00 poerty settlement ay: \$0.00 \$0.00
29.	Tax refunds ov No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp Soci	specific information at them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 poerty settlement ay: \$0.00 \$0.00 \$0.00 \$0.00 poerty settlement ay: \$0.00 \$0.00

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Deb	tor 1 Robert	Wheeler	Case number (if known)	
	First Name Middle N	lame Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance	; health savings account (HSA); credit, hom	eowner's, or renter's insurance	
	No ✓ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	Term Life State Farm Life Insurance		\$0.00
20	Any interest in property that is due you fi	vam camaana wha haa diad		
32.	If you are the beneficiary of a living trust, exp property because someone has died.		r are currently entitled to receive	
	✓ No			
	Yes. Describe			
33.	Claims against third parties, whether or Examples: Accidents, employment disputes,		lemand for payment	
	✓ No Yes. Describe			
34.	Other contingent and unliquidated claim to set off claims	s of every nature, including counterclai	ms of the debtor and rights	
	✓ No			
	Yes. Describe			
35.	Any financial assets you did not already I	ist		
	✓ No			
	Yes. Describe			
36.	Add the dollar value of all of your entries for Part 4. Write that number here	, , ,		\$700.00
Part	5: Describe Any Rusiness-Related	Property You Own or Have an Inte	rest In I ist any real estate in Part	1
	Do you own or have any legal or equitable			
	No. Go to Part 6.			rrent value of the
	Yes. Go to line 38.		Do	o not deduct secured claims exemptions
38.	Accounts receivable or commissions you	already earned	OI.	CACITIFUCITS
	✓ No Yes. Describe			
39.	Office equipment, furnishings, and suppli Examples: Business-related computers, soft		nes, rugs, telephones, desks, chairs, electro	onic devices
	✓ No			
	Yes. Describe			

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Deb	tor 1 Robert		Wheeler	Case number (if known)	
10	First Name	Middle Name Juipment, supplies you use in bu	Last Name		
40.	_	juipment, supplies you use in bi	isiness, and tools of your trade	•	
	✓ No				1
	Yes. Describe				
41.	Inventory				
	√ No				
	Yes. Describe				
42.	Interests in partnership	ps or joint ventures			
	✓ No	Na		0/ 26 2002 2026 22	
	Yes. Give specific	Name of	entity:	% of ownership:	
	information about them				
	шеш				
				<u> </u>	_
43	Customer lists mailing l	lists, or other compilations			
10.		noto, or other compilations			
	No No No your lists in	clude personally identifiable inform	ation (so defined in 11 LLCC S	101/41 0)\0	
	Tes. Do your lists in	cidde personally identifiable imomi	ation (as defined in 11 0.5.0. §	101(4174))?	
	No				
	Yes. Descri	be			
44.	Any business-related p	property you did not already list			
	✓ No				
	Yes. Give specific				<u> </u>
	information				
		I of your entries from Part 5, ind here		ou have attached	
•	art o. write that humber				
Part		rm- and Commercial Fishin	g-Related Property You O	wn or Have an Interest In.	
	If you own or have an i	interest in farmland, list it in Part 1.			
46.	Do you own or have an	y legal or equitable interest in	any farm- or commercial fishin	g-related property?	
	No. Go to Part 7.				Current value of the portion you own?
	Yes. Go to line 47.				Do not deduct secured claims
	_				or exemptions
47.	Farm animals Examples: Livestock, po	ultry form-raised fish			
		uiuy, iaiiii-iaiseu lisii			
	No				1
	Yes. Describe				

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Debt	or 1 Robert First Name		/heeler Cast Name	ase number (if known)	
48.	Crops-either growing of		ast reality		
	No Yes. Describe				
49.	Farm and fishing equip	oment, implements, machinery, fixture	s, and tools of trade		
	Yes. Describe				
50.	Farm and fishing suppl	lies, chemicals, and feed			
	Yes. Describe				
51.	Any farm- and comme	rcial fishing-related property you did n	ot already list		
	No Yes. Describe				
		I of your entries from Part 6, including			
Part 1	7: Describe All Pro	perty You Own or Have an Intere	st in That You Did Not L	ist Above	
53.		perty of any kind you did not already li s, country club membership	st?		
	✓ No				
	Yes. Give specific information				
54. A	dd the dollar value of al	l of your entries from Part 7. Write tha	t number here		<u> </u>
Part 8	8: List the Totals of	Each Part of this Form			
55. F	Part 1: Total real estate	, line 2			
56. p	part 2 total vehicles, lin	e 5			
57. P	art 3: Total personal an	d household items, line 15	\$440.00		
58. P	art 4: Total financial as	sets, line 36	\$700.00		
59. F	Part 5: Total business-re	elated property, line 45			
60. F	Part 6: Total farm- and f	ishing-related property, line 52			
61. F	Part 7: Total other prop	erty not listed, line 54			
62. 1	Fotal personal property.	Add lines 56 through 61	\$1140.00	Copy personal property total	+ \$1140.00
63. T	otal of all property on S	chedule A/B. Add line 55 + line 62			\$1140.00

		Case 19-1401	L1 Doc 1	Filed 05/15/19 Document	Entered (Page 20 of)5/15/19 14:07:36 f 79	Desc Main
Fill	in this inforr	nation to identify your c	ase:				
	otor 1	Robert First Name	Middle Na	Wheeler ame Last Na	me		
	otor 2 ouse, if filing)	First Name	Middle Na	ıme Last Na	ne		
Uni	ted States B	ankruptcy Court for the:	Northern	District of Illir (St	ois		
	se number lown)						
Ot	ficial I	Form 106C					Check if this is an amended filing
Sc	hedule	C: The Prop	erty You C	laim as Exer	npt		04/16
as e	xempt. If r		, fill out and atta	ch to this page as m			st the property that you claim as necessary. On the top of any
stat the tax- und you	e a specif amount o exempt re ler a law t r exempti	ic dollar amount as f any applicable state tirement funds—mant limits the exempon would be limited	exempt. Alterna utory limit. Som ay be unlimited tion to a particu to the applicable	itively, you may clai le exemptions—suc in dollar amount. H llar dollar amount a e statutory amount	m the full fair r h as those for owever, if you	narket value of the pro health aids, rights to re claim an exemption of	One way of doing so is to operty being exempted up to eceive certain benefits, and 100% of fair market value mined to exceed that amount,
		tify the Property You		-			
1.		of exemptions are you are claiming state and fe	-		•	you.	
		re claiming federal exe	-				
2.	For any p	operty you list on Sche	dule A/B that you	claim as exempt, fill i	n the information	n below.	

Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$200.00 description: lacksquare\$200.00 **Used Household goods** 100% of fair market value, up to any and furniture applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) \$150.00 description: **V** \$150.00 **Used Electronics** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) **✓** No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$50.00 description: \checkmark \$50.00 **Used Clothing** 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 11 Brief 735 ILCS 5/12-1001(b) \$40.00 description: **✓** \$40.00 **Used Costume Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 Brief 735 ILCS 5/12-1001(b) \$700.00 description: \checkmark \$700.00 Other financial account. 100% of fair market value, up to any Greendot Prepaid Card applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(f) description: \$0.00 $\overline{}$ **Term Life State Farm** 100% of fair market value, up to any Life Insurance applicable statutory limit I ine from Schedule A/B: 31 735 ILCS 5/12-1006 \$0.00 description: **✓** 401(k) or similar plan, 100% of fair market value, up to any **Pension Plan Through** applicable statutory limit Work Line from Schedule A/B: 21 Brief 735 ILCS 5/12-1006

\$0

100% of fair market value, up to any

applicable statutory limit

\$0.00

description:

Line from Schedule A/B:

401(k) or similar plan,

21

401(k) through work

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Fill in th	nis information to identify your	case:				
Debtor	1 Robert		Wheeler			
	First Name	Middle Name	Last Name			
Debtor						
(Spouse,	if filing) First Name	Middle Name	Last Name			
United	States Bankruptcy Court for the	: Northern	District of Illinois			
			(State)			
Case n						
Offic	cial Form 106D					Check if this is an amended filing
Sch	edule D: Credi	itors Who Ha	ve Claims Secur	ed by Prop	erty	12/15
more sp			le are filing together, both are eques of the entries, and attach it to			
1. D e	o any creditors have claims	secured by your proper	rty?			
~	No. Check this box and su	bmit this form to the court	with your other schedules. You ha	ve nothing else to repo	rt on this form.	
Ē	Yes. Fill in all of the informa	tion below.				
Part 1:	List All Secured Claims	•				
fo		reditor has a particular claim	rred claim, list the creditor separately, list the other creditors in Part 2. As g to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any

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Fill in this info	rmation to identify your c	ase:			
Debtor 1	Robert		Wheeler		
	First Name	Middle Name	Last Name	_	
Debtor 2				_	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois		
0			(State)		
Case number (If known)				-	
Official F	form 106E/F				Check if this is an amended filing
					_
Sched	ule E/F: Cre	editors Who	Have Unsecu	red Claims	12/15
other party to Form 106A/B) claims that ar the entries in known).	any executory contracts and on Schedule G: Exe e listed in Schedule D: C	s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims tach the Continuation Pa	could result in a claim. Also expired Leases (Official Form Secured by Property. If mor	o list executory contracts n 106G). Do not include an re space is needed, copy t	NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured he Part you need, fill it out, number rite your name and case number (if
		secured claims against v	_		
1. Do any c	reditors have priority ur	isecureu ciairiis agairist y	ou?		
	reditors have priority ur Go to Part 2.	isecureu ciaims agamst y	ou?		
	Go to Part 2.	secureu cianns against y	ou?		

Total

claim

Priority

amount

Nonpriority

amount

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Debt		Robert First Name	Middle Name	Wheeler Last Name	Case number (if known)	
Part		List All of Your NONPR				
	Do a	ny creditors have nonprior	ity unsecured cla	nims against you?	e court with your other schedules.	
	unse If mo	cured claim, list the creditor s	separately for each	claim. For each claim	er of the creditor who holds each claim. listed, identify what type of claim it is. Do no Part 3.If you have more than four priority ur	ot list claims already included in Part 1. nsecured claims fill out the Continuation
4.4	۸۵	ACTRA DECOVERY CERV				Total claim
4.1		ASTRA RECOVERY SERV on priority Creditor's Name			Last 4 digits of account number 67	
	_	30 W 33RD ST N STE 118 mber Street			When was the debt incurred? 9/20	<u>)17 </u>
	Nu	illibei Stieet			As of the date you file, the claim is: Che	eck all that apply.
	WI	CHITA Kar	ısas	67205	Contingent	
	Cit			Zip Code	Unliquidated	
		no incurred the debt? Chec Debtor 1 only	k one.		Disputed	
	¥				Type of NONPRIORITY unsecured claim	ı:
	L	Debtor 2 only			Student loans	
	F	Debtor 1 and Debtor 2 only At least one of the debtors	•		Obligations arising out of a separation divorce that you did not report as prior	
	F	Check if this claim relate	es to a communit	v debt	Debts to pension or profit-sharing plar debts	ns, and other similar
	ls t	』 the claim subject to offset		•	001 Collection; Colle	
	✓	No			ORIGINAL CREDITOF Other. Specify CASH 128	₹: SPEEDY
		Yes				
4.2	AM	- MER FST FIN			Last 4 digits of account number 00	04 \$1,135.00
		npriority Creditor's Name Box 565848			When was the debt incurred? 8/20	
	_	mber Street				
					As of the date you file, the claim is: Che Contingent	эск ан ттат арргу.
	_	llas Tex		75356-5848	Unliquidated	
	Cit Wh	y Sta no incurred the debt? Chec		Zip Code	Disputed	
	✓	Debtor 1 only	ж опо.		Type of NONPRIORITY unsecured claim	ı:
	F	Debtor 2 only			Student loans	
	F	Debtor 1 and Debtor 2 only	y		Obligations arising out of a separation	agreement or
		At least one of the debtors	and another		divorce that you did not report as prior	rity claims
		Check if this claim relate	es to a communit	y debt	Debts to pension or profit-sharing plar debts	is, and other similar
	ls t	the claim subject to offset	?		Other. Specify18 InstallmentLo	oan
	✓	No				
		Yes				
4.3		NPITAL ONE Inpriority Creditor's Name			Last 4 digits of account number35	91\$0.00
	11	013 W BROAD ST			When was the debt incurred? 11/2	004
	Nu	mber Street			As of the date you file, the claim is: Che	eck all that apply.
	GL	EN ALLEN Virg	jinia	23060	Contingent	
	Cit	y Sta	te	Zip Code	Unliquidated	
	Wi	no incurred the debt? Chec Debtor 1 only	k one.		Disputed	
	ř	Debtor 2 only			Type of NONPRIORITY unsecured claim	d.
	H	Debtor 1 and Debtor 2 only	V		Student loans	
	L	At least one of the debtors	•		Obligations arising out of a separation divorce that you did not report as prior	
		1		d. L.	Debts to pension or profit-sharing plar	•
	L	Check if this claim relate		y aebt	debts Other. Specify CreditCard	
	IS 1	the claim subject to offset No	f		Circle Openity	
	ř	1 Van				

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Debtor 1 Robert Wheeler Case number (if known) Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	n Page	
	After listing any entries on this page, number them beginning w	vith 4.5, followed by 4.6, and so forth.	Total claim
4.4	CAPITAL ONE, N.A.	 Last 4 digits of account number 6202 	\$0.00
	Nonpriority Creditor's Name 3936 E.Ft. Lowell Road Ste. 200	When was the debt incurred? 1/1999	_
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Tucson Arizona 85712	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	✓ No		
	Yes		
4.5	CB INDIGO/GF	Last 4 digits of account number1374	\$891.00
	Nonpriority Creditor's Name 268 S STATE ST STE 300	When was the debt incurred? 9/2018	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	SALT LAKE CITY Utah 84111 City State Zip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No		
	Yes		
4.6	City of Chicago	Last 4 digits of account number	\$2,171.60
	Nonpriority Creditor's Name 205 W Randolph # 1100	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	c/o Goldman and Grant	Contingent	
	Chicago Illinois 60606	Unliquidated	
	Chicago Illinois 60606 City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	<u>'</u>	divorce that you did not report as priority claims	
	블	debts	
	<u>.</u>	Other. Specify Parking and red light tickets	
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** City of Chicago Department of Law - Bankruptcy 4.7 \$2,002.96 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a Po Box 71429 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60694 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Judgment ✓ Is the claim subject to offset? No Yes DISCOVERBANK \$0.00 6788 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/1991 POB 15316 Street Number As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON 19850 Delaware Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. $\overline{}$ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? $\overline{\mathbf{v}}$ **✓** No Yes **DIVERSIFIED CONSULTANT** \$2,342.00 Last 4 digits of account number 9626 Nonpriority Creditor's Name When was the debt incurred? 3/2019 10550 DEERWOOD PARK BLVD Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one.

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Illinois Tollway \$60.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 2700 Ogden Ave Number Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated 60515 Downers Grove Illinois State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ **Tollway Violations** Is the claim subject to offset? No ◪ ☐ Yes 4.11 Metro PC \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 647 Donald Lee Hollowell Parkway N n/a Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Atlanta Georgia 30318 Disputed City State Zip Code Who incurred the debt? Check one Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Cell Phone Is the claim subject to offset? **✓** No Yes NATIONWIDE CASSEL LLC \$9,597.00 4.12 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6/2018 10255 WEST HIGGINS RD ST Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO Illinois 60641 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ 054 Automobile Is the claim subject to offset?

No Yes

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 NORDSTROM/TD BANK USA \$517.00 1449 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8/2018 PO BOX 6555 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ENGLEWOOD** 80155 Colorado Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? Yes 4.14 Provident Hospital of Cook County \$700.00 Last 4 digits of account number Nonpriority Creditor's Name 500 E 51st St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60615 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Medical Bill Is the claim subject to offset? **✓** No Yes 4.15 **RGS FINANCIAL** \$632.00 Last 4 digits of account number 3596 Nonpriority Creditor's Name When was the debt incurred? 12/2018 1700 JAY ELL DR STE 200 Number Street As of the date you file, the claim is: Check all that apply. Contingent RICHARDSON 75081 Texas Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt

✓ No

Yes

Is the claim subject to offset?

V

Other. Specify

Collection; Collecting for

ORIGINAL CREDITOR: TCF

NATIONAL BANK

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. ATT Mobility Name On which entry in Part 1 or Part 2 did you list the original creditor? 5910 W. Plano Pkwy Ste 10 Line 4.9 of (Check Part 1: Creditors with Priority Unsecured Claims one): Street Number Part 2: Creditors with Nonpriority Unsecured Plano Texas 75093 Last 4 digits of account number 9626 City State Zip Code Speedy Cash On which entry in Part 1 or Part 2 did you list the original creditor? Name 1931 N. Mannheim Rd Line 4.1 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims Melrose Park Illinois 60160 Last 4 digits of account number 6734 City State Zip Code On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 1405 XENIUM I N N STF 180 Line 4.15 Part 1: Creditors with Priority Unsecured Claims Street one): Number Part 2: Creditors with Nonpriority Unsecured Claims Minneapolis Minnesota 55441 Last 4 digits of account number 3596 Zip Code State HARRIS & HARRIS LTD On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6

of (Check

one):

Last 4 digits of account number

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured

Claims

111 W JACKSON BLVD S-400

Illinois

State

60604

Zip Code

Street

Number

CHICAGO

City

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Debtor 1 Robert Wheeler Case number (if known)

FIRST INAL	ne Middle Name Last Name			
Part 4: Add th	e Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purposes only	y. 28 U.S.C. §159.
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$21,774.56	
	6j. Total. Add lines 6f through 6i.	6j.	\$21,774.56	

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Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Robert	Wheeler		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number				
(If known)				

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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			DC	ocument rag	C 32 01	15
Fill ir	n this infor	mation to identify you	case:			
Debt	tor 1	Robert		Wheeler		
		First Name	Middle Name	Last Name		
Debt (Spou	tor 2 use, if filing)	First Name	Middle Name	Last Name		
Unite	ed States E	Sankruptcy Court for th	e: Northern	District of Illinois		
Casa	e number			(State)		
(If kno						
						Check if this is an amended filing
∩ff	ficial	Form 106H	I			amended ming
			_			
Scl	hedul	e H: Your Co	odebtors			12/15
		r every question. ve any codebtors? (If	you are filing a joint case, do	not list either spouse as	a codebtor	·.)
	Idaho, Lou	• •	ou lived in a community pro Mexico, Puerto Rico, Texas, W		•	nity property states and territories include Arizona, California,
	Yes.	Did your spouse, for	mer spouse, or legal equiva	alent live with you at the	time?	
		No				
		Yes. In which commu	nity state or territory did yo	u live?	Fill in	the name and current address of that person.
		Name of your spouse	e, former spouse, or legal equ	ivalent		
		Number Street				
		City	State	Zip C	ode	
	again as a	a codebtor only if tha	t person is a guarantor or o	osigner. Make sure yo	u have list	ouse is filing with you. List the person shown in line 2 ed the creditor on Schedule D (Official Form 106D), Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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Fill in this in	formation to identify	your case:		-				
Debtor 1	Robert First Name	Middle Name	Wheel Last N		Che	ock if this is:		
Debtor 2 (Spouse, if filing	First Name	Middle Name	Last N	ame	- _□	An amended filing		
the: Case number	Bankruptcy Court for	Northern	_ District of Illi (S	inois State)	- -	A supplement showing post- expenses as of the following		
(If known)						MM / DD / YYYY		
Official	Form 106I							
Schedu	le I: Your In	come					12/1	
spouse. If mo number (if kr		, attach a separate she y question.				not include information a ional pages, write your n		
Fill in you information	ır employment		Debtor 1			Debtor 2		
If you have more than one job, attach a separate page with information about additional		Employment status	Emplo	oyed mployed		Employed Not Employed		
employers		Occupation	Processing					
•	part time, seasonal, or bloyed work. Employer's name Edsal Manufacturing Company, Inc. Employer's address 1555 W 44th St				pany, Inc.			
•	n may include student naker, if it applies.	Employer 3 address	1555 W 4 Number Sti			Number Street		
			Chicago City	Illinois State	60609 Zip Code	City State	Zip Code	
		How long employed there?	16 years 6	months				
Part 2: Giv	ve Details About N	onthly Income						
spouse unles	ss you are separated.	e more than one employer,		information for		vrite \$0 in the space. Include or that person on the lines be For Debtor 2 or non-filing spouse		
		rry, and commissions (befo calculate what the monthly		2.	\$2,275.00			
3. Estimat	e and list monthly over	time pay.		3.	+ \$0.00			
4. Calcula	te gross income. Add li	ne 2 + line 3.		4.	\$2,275.00			

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Debtor 1Robert	Wheeler	Case number	(if	
First Name Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$2,275.00		
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$385.02		
5b. Mandatory contributions for retirement plans	5b.	\$108.33		
5c. Voluntary contributions for retirement plans	5c.	\$0.00		
5d. Required repayments of retirement fund loans	5d.	\$0.00		
5e. Insurance	5e.	\$199.33		
5f. Domestic support obligations	5f.	\$0.00		
5g. Union dues	5g.	\$26.00		
5h. Other deductions. Specify:	5h. +	\$0.00 +		
6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + +5h$.	5f + 5g 6.	\$718.68		
7. Calculate total monthly take-home pay. Subtract line 6 from lin	ne 4. 7.	\$1,556.32		
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing				
gross receipts, ordinary and necessary business expenses, an the total monthly net income.	d 8a.	\$0.00		
8b. Interest and dividends	8b.	\$0.00		
8c. Family support payments that you, a non-filing spouse, o dependent regularly receive				
Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement.	8c.	\$0.00		
8d. Unemployment compensation	8d.	\$0.00		
8e. Social Security	8e.	\$0.00		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any noncash assistance that you receive, such as food stamps (benefit under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	ts 8f.	\$0.00		
8g. Pension or retirement income	8g.	\$0.00		
· ·	8h. +	\$1,148.62 +		
8h. Other monthly income. Specify: See attached 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g				
3. Add all other modile Add lines oa + ob + oc + ou + oe + or +og	. [.	\$1,148.62		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing	10. spouse	\$2,704.94 +	=	\$2,704.94
11. State all other regular contributions to the expenses that you include contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or amounts.	ur household, your c	ependents, your roomm		
Specify:			11. +	\$0.00
12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical S				\$2,704.94
				Combined monthly income
13. Do you expect an increase or decrease within the year after No.	r you file this form?			
Yes. Explain:				
L. 100. Explain.				

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Debtor 1Robert		Wheeler			Case number (if			
	First Name	Middle Name	Last Name	knov	wn)			
Part 1:	Describe Employment							
		Debtor 1			Debtor 2			
Employ	ment status	Employed			Employed			
		Not Employed			Not Employed			
Occupa	ition	Meeting Rooms						
Employ	er's name	Aramark Campus LLC						
Employ	er's address	Po Box 8118						
		Number Street			Number Street			
		Philadelphia	Pennsylvania	19101				
		City	State	Zip Code	City	State	Zip Code	
How lor	ng employed there?	10 months	_			_		

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Debtor 1Robert Wheeler Case number (if known)

Part 2: Give Details About Monthly Income

Official Form 106l. Additional page.

For Debtor 1

For Debtor 2 or non-filing spouse

8h.Other monthly income. Specify:

1. Aramark Campus LLC \$1,148.62

Official Form 106l Schedule I: Your Income page 4

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		DOC	umem Page 37 of 7	9		
Fill in this infor	mation to identify your ca	ase:				
Debtor 1	Robert		Wheeler			
	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2				An amended fili	na	
(Spouse, if filing)	First Name	Middle Name	Last Name	브	_	
	Bankruptcy Court for the:	Northern	District of Illinois (State)	expenses as of		petition chapter 13 date:
Case number (If known)				MM / DD / YYY	Y	
Official	Form 106J					
Schedul	e J: Your Exp	enses				12/15
information. If			are filing together, both are equal s form. On the top of any addition			
Part 1: Des	cribe Your Househol	d				
1. Is this a joi	nt case?					
✓ No. Go	o to line 2					
Yes. D	oes Debtor 2 live in a se	parate household?				
	No					
Г	Yes. Debtor 2 must file	Official Forms 106J-2, Expe	enses for Separate Household of Deb	for 2.		
2. Do you hav	e dependents? No					
_	브	s. Fill out this information for	Dependent's relationship to	Donandantia	Door door	endent live
Debtor 2.	V	ch dependent	Debtor 1 or Debtor 2	Dependent's age	with you?	muent nve
			Partner	59 years	No.	
					✓ Yes.	
	penses include f people other Vo	1				
than	Vo					
yourself and dependents	-	5				
		Acathly Evacuos				
Part 2: Esti	mate Your Ongoing N	nonuny Expenses				
	of a date after the bankr		you are using this form as a suppl pplemental Schedule J, check the			
	•	ash government assistance on Schedule I: Your Incom	-			Your expenses
	I or home ownership exporthe ground or lot. 4.	penses for your residence.	Include first mortgage payments and		4.	\$700.00
If not incl	uded in line 4:					
4a. Real e	state taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or rente	er's insurance			4b.	\$0.00

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Robert
 Wheeler Last Name
 Case number (if known)

First Name	Middle Name Last Name		
			Your expenses
5. Additional mortgage payme	ents for your residence, such as home equity loans	5.	\$0.00
6. Utilities:			
6a. Electricity, heat, natural g	as	6a.	\$175.00
6b. Water, sewer, garbage co	ollection	6b.	\$0.00
6c. Telephone, cell phone, Ir	nternet, satellite, and cable services	6c.	\$125.00
6d. Other. Specify:		6d	\$0.00
7. Food and housekeeping su	pplies	7.	\$830.00
8. Childcare and children's ed	ducation costs	8.	\$0.00
9. Clothing, laundry, and dry	cleaning	9.	\$175.00
10. Personal care products a	nd services	10.	\$175.00
11. Medical and dental expen	nses	11.	\$70.00
12. Transportation. Include ga	as, maintenance, bus or train fare. ts	12.	\$400.00
13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions a	and religious donations	14.	\$0.00
15. Insurance. Do not include insurance de	ducted from your pay or included in lines 4 or 20.		
15a. Life insurance		15a	\$60.00
15b. Health insurance		15b	\$0.00
15c. Vehicle insurance		15c	\$0.00
15d. Other insurance. Specif	fy:	15d	\$0.00
16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
Specify:		16	\$0.00
17. Installment or lease paym	nents:	10	
17a. Car payments for Vehic	le 1	17a	\$0.00
17b. Car payments for Vehic	cle 2	17b	\$0.00
17c. Other. Specify:		17c	\$0.00
17d. Other. Specify:		17d	\$0.00
	y, maintenance, and support that you did not report as deducted from		\$0.00
, , ,	ule I, Your Income (Official Form 106I).	18.	
Specify:	to support others who do not live with you.	10	#0.00
	ses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	19.	\$0.00
20a. Mortgages on other pro		20a	\$0.00
20b. Real estate taxes.		20b	\$0.00
20c. Property, homeowner's	s, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, an		20d	\$0.00
20e. Homeowner's associati		20e	\$0.00
			Ψ0.00

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Debtor 1	Robert			Wheeler	Case number (if known)		
	First Name		Middle Name	Last Name			
21.Other	r. Specify:					21	\$0.00
22. Calc	ulate you	r monthly expense	es.				\$2,710.00
22a. <i>A</i>	Add lines 4	through 21.					\$0.00
22b. (Copy line 2	22 (monthly expen		\$2,710.00			
22c. A	Add line 22	2a and 22b. The re	22.				
23.Calcu	ılate your	monthly net inco	ome.				
23a. (Copy line 1	12 (your combined	monthly income) from S	Schedule I.		23a	\$2,704.93
23b. (Copy your	monthly expenses	from line 22 above.			23b	\$2,710.00
23c. Subtract your monthly expenses from your monthly income.							(\$5.07)
-	The result	is your monthly ne	et income.			23c	
24. Do y o	ou expect	an increase or d	ecrease in your expens	ses within the year after y	ou file this form?		
-	-						
				oan within the year or do yo nodification to the terms of y			
√ N	lo						
	'es						
Ш,	63						
	E	xplain here:					

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Fill in this info	rmation to identify your ca	ise:		
Debtor 1	Robert		Wheeler	
	First Name	Middle Name	Last Name	_
Debtor 2				_
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	_
Case number				_
(If known)				
Official	Form 106De	<u>c</u>		Check if this is an amended filing
Declarat	tion About an I	ndividual Deb	tor's Schedules	12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t 1: Sign Below								
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	✓ No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary a	and schedules filed with this declaration and							
	that they are true and correct.								
X	/s/ Robert Wheeler	×							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 5/15/2019	Date							
	MM/DD/YYYY	MM/DD/YYYY							

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Fill in	this infor	rmation to identify your c	ase:					
Debt	or 1	Robert		Wheeler				
Debt	o = 0	First Name	Middle N	ame Last Nam	е			
	or 2 se, if filing)	First Name	Middle N	ame Last Nam	e			
Unite	ed States E	Bankruptcy Court for the:	Northern	District of Illino				
	number			(Stat	e)			
(If kno	wn)				_	<u></u>		Check if this is ar
Off	icial	Form 107						amended filing
Sta	teme	nt of Financia	l Affairs fo	or Individuals	Filina for	Bankru	ptcv	04/16
Be as	comple	ete and accurate as po If more space is neede	ssible. If two ma	rried people are filing	together, both	are equally r	esponsible for	
numi		own). Answer every qu						
Part	1: Give	e Details About Your	Marital Status a	and Where You Lived	Before			
1.	What is	your current marital sta	ntus?					
	Ма	rried						
	✓ Not	t married						
2.	During t	the last 3 years, have yo	u lived anywhere	other than where you liv	ve now?			
	✓ No							
		s. List all of the places yo	u lived in the last	3 years. Do not include v	vhere you live no	OW.		
	Del	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
								_
					Same as	Debtor 1		Same as Debtor 1
	Nui	mber Street		From	Number Stree	t		From
				То				To
	City	y State	Zip Code		City	State	Zip Code	Some as Debter 1
					Same as	Debtor 1		Same as Debtor 1
	Nui	mber Street		From	Number Stree	t		From
				To	-			To
	0::	Obsta	7:- O- 1:		Cit.	Otal -	7:- 0 - 1 -	
	City	y State	Zip Code		City	State	Zip Code	
		e last 8 years, did you e pries include Arizona, Califo						Community property states
		morado reizoria, Odino		, 14044444, 14044 1410/100,	. 3010 11100, 164	as, masiningto	, 111000113111.	''
	✓ No Yes.	Make sure you fill out So	chedule H: Your (Codebtors (Official Form	106H).			

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, $\overline{\mathbf{A}}$ Wages, \$13449.09 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$37124.09 For last calendar year: commissions, commissions, (January 1 to December 31, 2018 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$29000.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2018 YYYY For the calendar year before that: (January 1 to December 31, 2017

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Debtor 1 Robert Wheeler Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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r 1	1 Robert			Wh	eeler	Case number	(if known)
	First Name		Middle Name	Las	t Name		
nsi orp ige	iders include your r porations of which	relatives; a you are a or a busin	ny general partners n officer, director, l ess you operate as	s; relatives of any person in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; g securities; and any managing domestic support obligations,
✓	No						
	Yes. List all payr	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insi	der? ude payments on o	debts gua		d by an insider.			n account of a debt that benefited an
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name						
	Number Street						
		State	Zip Code				
-		State	Zip Code				
-	City	State	Zip Code				
-	City Insider's Name Number Street	State	Zip Code				

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Debtor 1 Robert Wheeler Case number (if known) First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	or 1	Robert		Wheeler	Case number (if known	7)	
		First Name Middle Name		Last Name	·		
11.		thin 90 days before you filed for bankruptcy counts or refuse to make a payment becau			bank or financial institution,	, set off any amou	ints from your
	✓	No Yes. Fill in the details.					
		1		Describe the action the	ne creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account	number: XXXX-		
		City State Zip Code					
12.		hin 1 year before you filed for bankruptcy, pointed receiver, a custodian, or another o		y of your property in the	possession of an assignee f	or the benefit of o	creditors, a court-
	✓	No					
		Yes					
Part	5:	List Certain Gifts and Contributions					
13.		ithin 2 years before you filed for bankruptc	, did y	ou give any gifts with a	total value of more than \$60	0 per person?	
		Yes. Fill in the details for each gift.					
		Gifts with a total value of more than \$600 per person	•	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code					
		Person's relationship to you					
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code Person's relationship to you					

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	Robert	Wheeler Case no	umber <i>(if known)</i>	
	First Name Middle Name	Last Name		
1. Wit	thin 2 years before you filed for bankruptcy,	did you give any gifts or contributions with a	total value of more the	an \$600 to any charity?
	l Na			
✓	No			
	Yes. Fill in the details for each gift or contrib	oution.		
	Gifts or contributions to charities	Describe what you contributed	Doto v	ou Value
	that total more than \$600	Describe what you contributed	Date ye contrib	
	that total more than \$000		Contrib	Juted
	Charity's Name			
	,			
	New Joseph Charles	<u> </u>		
	Number Street			
	City State Zip Code			
rt 6:	List Certain Losses			
gar ✓	nbling? No			
Ш	Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for	the loss Date of	of your Value of property
	how the loss occurred	Include the amount that insurance has p		lost
		pending insurance claims on line 33 of 3	Schedule	
		A/B: Property.		
				
r+ 7.	List Certain Payments or Transfers			
✓	No Yes. Fill in the details.			
			Date p	ayment Amount of
		Description and value of any property transferred	or tran	sfer payment
			or tran was ma	sfer payment
	Semrad Law Firm			sfer payment ade
	Semrad Law Firm Person Who Was Paid	transferred	was ma	sfer payment ade
	Person Who Was Paid	transferred	was ma	sfer payment ade
		transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street	transferred	was ma	sfer payment ade
	Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code	transferred	was ma	sfer payment ade

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Debt	or 1	Robert		Wheeler	Case number (if kn	own)	
		First Name	Middle Name	Last Name			
17.	help	nin 1 year before you filed o you deal with your credit not include any payment or t	tors or to make paym		ur behalf pay or trans	sfer any property to a	nyone who promised to
	✓	No					
		Yes. Fill in the details.					
				Description and value of an transferred	y property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street		•			
		City State	Zip Code				
	Inclu	transfers that you have alrea	and transfers made as s	security (such as the granting of a	security interest or mo	rtgage on your propert	y). Do not include gifts
	Ш	Yes. Fill in the details.					
				Description and value of protransferred		any property or s received or debts p nge	Date aid transfer was made
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
۱9.	ben	nin 10 years before you file eficiary? ese are often called asset-pro		d you transfer any property to a	self-settled trust or	similar device of whic	ch you are a
	· [2]	No	,				
	Ц	Yes. Fill in the details.		Description and value of the	ne property transferr	red	Date transfer was
		Name of trust					made
		ivaille Oi tiuSt					

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Wheeler Debtor 1 Robert Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Robert Wheeler Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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Deb	tor 1	Robert				heeler	Cas	se number (i	f known)		
		First Name	N	Middle Name	Las	st Name					
26.	Hav	e you been a party	y in any judici	al or administi	rative proce	eding under	any environme	ntal law? In	nclude settlemen	its and order	rs.
		No Yes. Fill in the det	ails.								
					Court or ag	ency		Nature	of the case		Status of the case
		Case title			Court Name						Pending
		Case number			NumberStree	et					On appeal
		_			City	State	Zip Code				Concluded
Part	11:	Give Details Ab	oout Your Bu	usiness or Co	onnections	to Any Bu	siness				
27.	Witl	nin 4 years before	you filed for b	ankruptcy, dic	d you own a	business or	have any of the	following o	connections to a	ny business?	
		A sole propri	etor or self-en	nployed in a tra	ade, profess	sion, or other	activity, either	full-time or p	part-time		
		A member of A partner in a		lity company (l	LC) or limite	ed liability pa	artnership (LLP)				
				naging executiv	e of a corp	oration					
		An owner of a	at least 5% of	the voting or e	equity securi	ties of a corp	ooration				
	✓	No. None of the a									
	Ш	Yes. Check all that	at apply abov	e and fill in the			ousiness. are of the busine	988	Employer Iden	itification nu	mber Do not
					Desci	ibe the nate	are or the busine		include Social		
		Business Name			_				EIN:		
		Number Street			 Name	of account	ant or bookkee	per	Dates business existed per		
		City	State	Zip Code	_				From	To	
					Descr	ribe the natu	re of the busin	ess	Employer Iden include Social		
		Business Name			_				EIN:		
		Number Street			_				Dates busines	s existed	
		City	State	Zip Code	Name	of account	ant or bookkee _l	per	From	To	
		•		,					110111	10	<u> </u>
					Descr	ribe the natu	ire of the busing	ess	Employer Iden include Social		
		Business Name			_				EIN:		
		Number Street			— Name	of account	ant or bookkee	per	Dates busines	s existed	
		City	State	Zip Code	_				From	To	<u></u>

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Debt	tor 1	Robert		Wheeler	Case number (if known)
		First Name	Middle Name	Last Name	
28.		ditors, or other parties.		give a financial statement t	o anyone about your business? Include all financial institutions,
	Ш	Yes. Fill in the details belo	JW.		
				Date issued	
		Name		MM/DD/YYYY	
		Name		WINVI DE TITT	
		Number Street			
		City State	Zip Code		
Part	12.	Sign Below			
t	rue a	and correct. I understand kruptcy case can result in	that making a false stater n fines up to \$250,000, or	nent, concealing property,	s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ Robert V Signature of De			Signature of Debtor 2
		Signature of De	edior i		Date
		Date 5/15/201	9		Date
[[√ ✓ ✓	lo 'es		nancial Affairs for Individual	s Filing for Bankruptcy (Official Form 107)?
	_ `		will it list all attor		
	≚	lo 'es. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Robert		Wheeler
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
Case number (If known)			(State)

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors V information below.	Vho Have Claims Secured by Property (Official Forn	n 106D), fill in the
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.

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Debtor	Robert		Wheeler	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired	Personal Property Leas	es		
informa	tion below. Do not list re		l leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).	
Des	scribe your unexpired pe	rsonal property leases		Will the lease be assumed?	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:			-	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:			_	
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			☐ No ☐ Yes	
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:			_	
Part 3:	Sign Below				
Unde	-		my intention about any	property of my estate that secures a debt and any personal	
*	/s/ Robert Wheeler		×		
_	gnature of Debtor 1		_	gnature of Debtor 2	
	ate 5/15/2019		Da	ate MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

		Northern Distric	t or illinois	
n re	Robert Wheeler		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATION	N OF ATTORNEY F	OR DEBTOR
C	Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within one rendered on behal	e year before the filing of the p	etition in bankruptcy, or agreed to	be paid to me, for services
F	For legal services, I have agreed to a	ccept		\$1,765.00
F	Prior to the filing of this statement I	have received		\$0.00
E	Balance Due			\$1,765.00
2. T	The source of the compensation pai	d to me was:		
	✓ Debtor	Other (specify)		
3. 7	The source of the compensation pai	d to me is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the a members and associates of my		with any other person unless the	y are
[w firm. A copy of the agreemer	h a other person or persons who a nt, together with a list of the name	
5. l	n return for the above-disclosed fee	e, I have agreed to render legal	service for all aspects of the bank	ruptcy case, including:
	 a. Analysis of the debtor's fina bankruptcy; 	ncial situation, and rendering a	advice to the debtor in determining	g whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statemen	ts of affairs and plan which may b	pe required;
	c. Representation of the debto	at the meeting of creditors an	nd confirmation hearing, and any a	adjourned hearings thereof;
6. E	By agreement with the debtor(s), the	above-disclosed fee does not	t include the following services:	
		CERTIFICA	ATION	
	ertify that the foregoing is a comple r(s) in this bankruptcy proceedings.	te statement of any agreement	t or arrangement for payment to n	ne for representation of the
	5/15/2019		/s/ Ryan P Crotty	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Wheeler, Robert	Case No	
	Debtor(s)	Odse No.	
		Chapter.	Chapter7
	VERIFI	CATION OF CREDITOR MAT	RIX
Th knowledge	•	y that the attached list of creditors is tru	ue and correct to the best of their
Date:	5/15/2019	/s/ Wheeler, Rober Wheeler, Robert	ert
		Signature of Debi	tor

NATIONWIDE CASSEL LLC 10255 WEST HIGGINS RD ST CHICAGO, IL, 60641

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL, 32256

ATT Mobility PO Box 6416 Carol Stream, IL, 60197

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA, KS, 67205

Speedy Cash 11100 S Cicero Ave Alsip, IL, 60803

AMER FST FIN PO Box 565848 Dallas, TX, 75356-5848

CB INDIGO/GF PO Box 4499 Beaverton, OR, 97076

RGS FINANCIAL PO Box 852039 Richardson, TX, 75085

TCF 200 Lake Street East Wayzata, MN, 55391

NORDSTROM/TD BANK USA PO BOX 6555 ENGLEWOOD, CO, 80155

CAPITAL ONE, N.A. 3936 E.Ft. Lowell Road Ste. 200 Tucson, AZ, 85712 CAPITAL ONE PO Box 1269 Greenville, SC, 29602

DISCOVERBANK POB 15316 WILMINGTON, DE, 19850

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

City of Chicago 205 W Randolph # 1100 c/o Goldman and Grant Chicago, IL, 60606

City of Chicago Department of Law - Bankruptcy Po Box 71429 Chicago, IL, 60694

Provident Hospital of Cook County 500 E 51st St Chicago, IL, 60615

Illinois Tollway 2700 Ogden Ave Legal Dept Downers Grove, IL, 60515

Metro PC 647 Donald Lee Hollowell Parkway N Atlanta, GA, 30318

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Debtor 1 Robert First Name		/heeler ast Name	_ Case number (if known)	
·	estions for Reporting Purposes	35 (40)(10		
16. What kind of debts do you have?	16a. Are your debts primarily of "incurred by an individual of the No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily of the money for a business or in the No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you	primarily for a person business debts? <i>Bus</i> vestment or through	al, family, or househo iness debts are debts the operation of the b	Id purpose." that you incurred to obtain ousiness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fundaments are paid to be paid to	7. Do you estimate that ands will be available to	distribute to unsecured	
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,00 5,001-10,0 10,001-25,	00	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$10,000,00 \$50,000,00	-\$10 million 11-\$50 million 11-\$100 million 101-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?		\$10,000,00 \$50,000,00	-\$10 million 01-\$50 million 01-\$100 million 001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
For you	correct. If I have chosen to file under Chof title 11, United States Code. under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance will understand making a false state.	apter 7, I am aware the I understand the relied of I did not pay or agreed and read the notion that the chapter of title tement, concealing prase can result in fines 1519, and 3571.	nat I may proceed, if el of available under each se to pay someone wh ce required by 11 U.S 11, United States Co roperty, or obtaining n	de, specified in this petition. noney or property by fraud in mprisonment for up to 20 years, or

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Fill in this infor	mation to identify your	case:		
Debtor 1	Robert		Wheeler	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
Linitad States F	Bankruptcy Court for the		District of Illinois	
Officed States L	Sankrapicy Count for the	. Northen	(State)	-
Case number (If known)				
Official	Form 106D	ec		Check if this is a amended filing
Declarat	ion About an	Individual Debto	or's Schedules	12/1
If two married	people are filing toge	ther, both are equally respons	sible for supplying correc	ot information.
money or prop	erty by fraud in conne 1341, 1519, and 3571	ction with a bankruptcy case		aking a false statement, concealing property, or obtaining \$250,000, or imprisonment for up to 20 years, or both. 18
Did you p	ay or agree to pay sor	neone who is NOT an attorne	ev to help you fill out ban	kruptcy forms?
IZI No			,,	
	Name of person		Attach Bankruptcy Signature (Official F	Petition Preparer's Notice, Declaration, and Form 119).
that they	naity of perjury, I deci are true and correct. art Wheeler / / / / / / / / / / / / / / / / / / /	are that I have read the sumr	×	with this declaration and e of Debtor 2
Date 5/1:	5/2019 1/DD/YYYY		Date	IM/DD/YYYY

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Debtor 1 E				Wheeler	Case number (if known)	
F	First Name	M	iddle Name	Last Name		
	sin 2 years before litors, or other pa		ankruptcy, did yo	ou give a financial state	nent to anyone about your business? Include all financial i	nstitutions
ليشا	No Yes. Fill in the de	tails below.				
				Date issued		
	Name			MM/DD/YYYY	<u></u>	
	Number Street			·		
	City	State	Zip Code	<u></u>		
art 12:	Sign Below					
a banl	*	result in fines Robert Wheeler	2-115	or imprisonment for up	to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 357	1.
	Signat	ture of Debtor 1		, Vi	Signature of Debtor 2	
	Date	5/15/2019			Date	
Did yo	ou attach addition	nal pages to Yo	our Statement of	Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?	
N N	o es					
□ Y						
ll	ou pay or agree to	pay someone	who is not an at	torney to help you fill o	nt bankruptcy forms?	
لسبا		o pay someone	who is not an at	torney to help you fill o	nt bankruptcy forms?	

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Debto	r Robert		Wheeler	Case number (iii
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpire	ed Personal Property Leases		
inform	ation below. Do not lis	property lease that you listed in So of real estate leases. Unexpired lea al property lease if the trustee do	ases are leases that a	Contracts and Unexpired Leases (Official Form 106G), fill in the tree still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
De	escribe your unexpired	personal property leases		Will the lease be assumed?
Le	essor's name:			☐ No ☐ Yes
	escription of leased operty:			least
Le	essor's name;			No
	escription of leased operty:			Yes
·	essor's name:			
	escription of leased operty:			Yes
•				
De	escription of leased operty:			
Le	essor's name;			□ No □ Yes
	escription of leased operty:			
	essor's name:			□ No □ Yes
	operty: essor's name:			□ No
	escription of leased operty:			Yes
	Sign Below	declare that I have indicated my	intention about any	property of my estate that secures a debt and any personal
pro	perty that is subject to			
	/s/ Robert Wheeler Signature of Debtor 1	per when v	X Sig	nature of Debtor 2
(Date 5/15/2019 MM/DD/YYYY		Dat	e MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Wheeler, Robert	Case No	
	Debtor(s)	Case No.	
		Chapter.	Chapter7
	VERIF	ICATION OF CREDITOR MATE	RIX
TI knowledge		rify that the attached list of creditors is true	e and correct to the best of their
Date:	5/15/2019	/s/ Wheeler, Robert Wheeler, Robert Signature of Debto	70- 70-7

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8. Unemployment compensation Do not enter the amount if you contend under the Social Security Act. Instead, list For you For your spouse 9. Pension or retirement income. Do not benefit under the Social Security Act. 10. Income from all other sources not list amount. Do not include any benefits repayments received as a victim of a war of international or domestic terrorism. If ne page and put the total below. Total amounts from separate pages, if a seach column. Then add the total for Column column. Then add the total for Column the act in the page and put the total current monthly incompensation. It is possible to the page and put the total current monthly incompensation in the page and the page and the total for Column the page and the total current monthly incompensation. It is possible to the page and the page and the total for Column the page and the page a	ot include any amounisted above. Specificeived under the Society a crime again accessary, list other surples and the total for the total for the total for the year. Forme from line 11. In this in a year), or this part of the formetisted and the total for the year.	\$0.00 \$0.00 unt received that wa fy the source and ocial Security Act or ast humanity, or sources on a separate res 2 through 10 for r Column B. es to You Follow these steps:	Deb \$0.0 s a \$0.0 te	.00	+ Copy line	Column B Debtor 2 or non-filing spou	use	\$3,294.88 Total current
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14a. Line 12b is less than or equal Go to Part 3.	ne amounts, go on also be available at t	nline using the link s the bankruptcy clerk	pecified in the sep k's office.	arate			L ance.	
	to line 13. On the t	top of page 1, chec	k box 1, There is r	no presumpt	tion of ab	use.		
14b. Line 12b is more than line 13. Go to Part 3 and fill out Form	. On the top of pag 122A-2.	ge 1, check box 2, T	he presumption o	f abuse is d	etermined	d by Form 122A-	-2.	
Part 3: Sign Below								
By signing here, I declare under penalt	y of perjury that the	e information on this	s statement and in	any attachn	nents is t	rue and correct.		
	,			-				
Signature of Debtor 1	Whil.	<u></u>	Signature of	Debtor 2		***************************************		
•			-					
Date 5/15/2019 MM/DD/YYYY			Date 5/15/					
If you checked line 14a, do NOT fill			\$VIIVI/L	DD/YYYY				

If you checked line 14b, fill out Form 122A-2 and file it with this form.

DISCLAIMER REGARDING STRATUS INTELLIGENCE

Please be advised that some of the partners of this firm have a financial interest in the company, Stratus Intelligence, LLC, that developed and provides to this firm (as well as other firms) the computer software used process its clients' matters. You will not be charged any extra fees or costs as a result of the firm's use of this software as compared to other software. However, as a result of his financial interest in the software company, the interested partners will receive a financial benefit in the range of \$10-15 from the use of this software to process your matter should you determine to retain the firm for your case. The firm does not utilize any other software to process its clients' matters. The firm's use of the software does not impact on the obligations of firm attorneys to exercise independent professional judgment on your behalf represent you with respect to your matter.

I have read and understand the above disclaimer.

Debtor

Debtor

Date

Data

itial:

THE SEMRAD LAW FIRM, LLC

CHAPTER 7 CHICAGO PARKING TICKETS DISCLAIMER

You have chosen to file a Chapter 7 bankruptcy and have included parking tickets owed to the City of Chicago in your list of debts. Parking tickets are not dischargeable in Chapter 7. However, effective January 1, 2019, the City of Chicago has enacted an ordinance that will waive parking; standing, compliance, automated camera tickets, fees and penalties including boot, impound, storage, and administrative fees, as long as those debts are more than 3 years old as of the date you file your Chapter 7 filing.

In the event you owe any recent Chicago tickets or fees than are less than 3 years old, you will have to complete a payment plan for the recent tickets and fees before any old tickets or fees are waived. The payment plan offered by the City of Chicago can be viewed at https://www.citvofchicago.org/city/en/depts/fin/supp_info/revenue/parking_and_red-lightticketpaymentplans.html.

WARNING: If you begin a payment plan for recent tickets and fees and then default on that plan, no tickets will be waived and you will be responsible for the full amount due including all older tickets and fees.

Because this ordinance is very recent and has not been sufficiently tested, it is difficult to DebtStoppers to advise you as to whether you should file a Chapter 7 or Chapter 13 for Chicago parking tickets. This ordinance only applies to tickets issued by the City of Chicago and does not apply to any other municipalities or state tickets. This ordinance does not apply to Illinois tollways violations. These other debts will remain non-dischargeable if you file a Chapter 7. If you also have these debts or are concerned about your ability to successfully complete the plan offered by the City of Chicago, a Chapter 13 may be a better option since it is the only type of bankruptcy that can discharge governmental fines such as parking tickets and tollway violations.

Debtor Name

Date

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The Semrad Law Firm, LLC 20 S. Clark Street, 28th Floor Chicago IL 60603

	CHAPTER 7 DISCLAIMERS
1.	I understand that The Semrad Law Firm, LLC has pulled my credit report, but that credit report does not report every debt I owe. I understand that it is my responsibility to provide all my debts to The Semrad Law Firm, LLC to list in my bankruptcy.
	<u></u>
2.	I agree that in the preparation of my bankruptcy petition and schedules that I have disclosed to The Semrad Law Firm, LLC all my debts, sources of income, assets, personal property, real property, transfers of real estate or any property over the past 4 years, and all expenses I have.
3.	I agree that I will attend my creditors meeting at the time, date, and location that will be mailed to me by the Bankruptcy Court. Failure to attend this meeting is grounds for my case to be dismissed. I understand that at this meeting I will bring my driver's license or State ID and my original social security card. I understand that failure to bring said requested documents to the meeting could be grounds for the meeting to not be held.
4.	I understand and agree to complete my 2 nd credit counseling course (Debtor Education course) within 45 days of my original 341 meeting date, and submit a copy of the certificate to my attorney and confirm receipt of the certificate. I also understand that there will be a separate cost for the 2 nd course. I understand that failure to complete this 2 nd course and submit it to my attorney can be grounds to have my case close without a discharge. I understand that if my case closes without a discharge, that additional filing fees would have to be paid to re-open my case to file the 2 nd Debtor Education certificate.
5.	If I have a garnishment coming out of my paycheck, The Semrad Law Firm, LLC will send notice of the bankruptcy to my payroll department and garnishing creditor to stop wage garnishments as long as I provide my payroll department contact information. If I choose to not provide my payroll contact information, I understand and agree that it is my responsibility to contact my payroll and garnishing creditor and provide them with proof of filing. Further, although the Semrad Law Firm, LLC will send notice of the bankruptcy filing to my payroll department and garnishing creditor, it is my responsibility to ensure notice was received.

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The Semrad Law Firm, LLC 20 S. Clark Street, 28th Floor Chicago IL 60603

6.	I understand that I must have filed my federal and state taxes for the past 4 years if I was legally required to, and failure to have done so is grounds to have my case dismissed.
7.	I understand that the entire firm of The Semrad Law Firm, LLC represents me and that while a different attorney might have counseled me and prepared my case, once it is filed, my case will be assigned to the attorneys and staff of the Chapter 7 department for the remainder of my case.
8.	I understand and agree that I must fully disclose any and all assets, real property, cash, expected tax refunds, inheritance, or personal property of any kind prior to the filing of my bankruptcy.
9.	I further understand that any assets including, but not limited to real property, cash, expected tax refunds, future settlements, potential or pending lawsuits, or personal property that has equity that cannot be exempted is subject to liquidation by the Chapter 7 Trustee.
10.	I understand that the following debts will not be discharged in my Chapter 7 (this list shows the most common non-dischargeable debts, but not necessarily all): parking tickets, moving violations, student loans, certain governmental debts including taxes and code violations, and child support.
	I understand that if I wish to keep a secured debt, for example, a mortgage(s) or automobile, I must sign a reaffirmation agreement. I understand that even if I am current on the debt, a reaffirmation agreement is offered solely at the discretion of the creditor. I understand that for my creditor(s) to offer me a reaffirmation agreement I must be current on my monthly payment. If I do not have a reaffirmation agreement offered to me by my finance company, that I may not be able to keep my secured debt.
	Z5)

12. I understand that I will work with my attorney to ensure the reaffirmation agreements are timely received, signed and filed with the Court. I understand the reaffirmation agreement must be filed with the court before the case discharges. Once the reaffirmation agreement is signed, filed with the Court and approved, the debt will be non-dischargeable. I understand that the bankruptcy judge will review my budget when approving or denying the reaffirmation agreement and that it is possible that the judge may determine that the reaffirmation is not in my best interest and deny the reaffirmation.

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The Semrad Law Firm, LLC 20 S. Clark Street, 28th Floor Chicago IL 60603
13. I understand that the scope of representation from The Semrad Law Firm, LLC does not extend to credi repair.
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14. I understand that if I have made any recent credit card transactions, cash advances, or incurred loans during the 3 month period prior to my bankruptcy, an adversary lawsuit may be brough against me in bankruptcy court. An adversary is a lawsuit in which a creditor asks the court to make certain debt non-dischargeable. I understand that if I want The Semrad Law Firm, LLC to represent me in an adversary I must pay additional attorney's fees.
<u>1211</u>
15. I have disclosed all prior bankruptcies that I have filed in the last eight (8) years. I further understand that if I have filed a Chapter 7 bankruptcy in the last eight (8) years, I am not eligible to file a Chapter 7 right now.
16. I understand that to be eligible for a Chapter 7 I cannot have any disposable income after paying all my monthly expenses, and I also have to pass the Form 122A Means test, and if I do have a significant amount of disposable income available or fail the Form 122A that I may be ineligible for a Chapter 7. I understand that if I do have any disposable income and we attempt to rebut the presumption, the United States Trustee may deem my case an abuse and I may have to convert to a Chapter 13 or let my case be dismissed.
17. I understand and acknowledge that when I surrender real property through my Chapter 7 bankruptcy that the property is still my responsibility until it is sold at a foreclosure sale. I must keep up the property insurance and maintenance of said property, including, but not limited to, future water bills until the sale date. I understand that, if I neglect to maintain the property and am assessed city code violations, I will be responsible to pay those fines. Further, I must continue to pay homeowners and association fees after the bankruptcy is filed until the property is sold. If I do not pay these fees the Association can sue me for the balance of unpaid fees from the filing of the bankruptcy until the property is sold.
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The Semrad Law Firm, LLC 20 S. Clark Street, 28th Floor Chicago IL 60603

18. I understand that if I have a co-signer on any of my debts, the co-signer will still be responsible for that debt after the case is filed.
<u> </u>
19. I agree that I authorized The Semrad Law Firm, LLC to file my bankruptcy case, after I reviewed my bankruptcy petition and schedules.
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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Robert Wheeler		Case No.	
	Debtor	***************************************		(If known)
			Chapter	Chapter 7
1	. Pursuant to 11 U.S.C. § 329(a) and Fed. Ba	MPENSATION OF ATT ankr. P. 2016(b), I certify that I am the att	torney for the abo	ovenamed debtor(s) and that
	compensation paid to me within one year be rendered or to be rendered on behalf of the	before the filing of the petition in bankru	iptcy, or agreed to	o be paid to me, for services
	For legal services, I have agreed to accept			\$1,765.00
	Prior to the filing of this statement I have re	eceived		\$0.00
	Balance Due			\$1,765.00
2	. The source of the compensation paid to me	e was:		
	✓ Debtor	Other (specify)		
3	. The source of the compensation paid to me	e is:		
	✓ Debtor	Other (specify)		
4	. I have not agreed to share the above-d members and associates of my law firm	lisclosed compensation with any other p n.	person unless the	ey are
		osed compensation with a other person . A copy of the agreement, together with on, is attached.		
5	. In return for the above-disclosed fee, I have	e agreed to render legal service for all as	spects of the bank	kruptcy case, including:
	 Analysis of the debtor's financial si bankruptcy; 	ituation, and rendering advice to the deb	otor in determinir	ng whether to file a petition in
	b. Preparation and filing of any petitic	on, schedules, statements of affairs and	plan which may	be required;
	c. Representation of the debtor at the	e meeting of creditors and confirmation I	hearing, and any	adjourned hearings thereof;
6	By agreement with the debtor(s), the above	⊢disclosed fee does not include the foll	owing services:	
		CERTIFICATION		
	I certify that the foregoing is a complete stat tor(s) in this bankruptcy proceedings.	ement of any agreement or arrangement	t for payment to i	me for representation of the
	5/15/2019	/s/ Rya	an P Crotty	
	Date	Signatur	re of Attorney	
		Semra	d Law Firm	
			of law firm	

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Thank you for selecting The Semrad Law Firm LLC (the "Firm") as legal counsel. It is our policy to confirm in writing the terms of our engagement, including the scope of our representation and how we will charge for our legal services. Those terms are set forth below.

- Scope of Representation. The Firm will be representing you in all aspects of your Bankruptcy case filed under Chapter 7 of the United Stated Bankruptcy Code except for any adversary proceedings that may be filed against you. The scope of this representation does not include any other civil or criminal proceedings.
- 2. Conditional Representation. The Firm has agreed to represent you on the condition that you will enter into and sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case. If you refuse to enter into and sign the agreement within ten (10) days after the filing of your case, the Firm will file a motion to withdraw from representing you.
- 3. Prepetition Fees.
 - a. Before the case is filed, the Firm agrees to:
 - Personally counsel you regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures as well as nonbankruptcy options, and answer your questions;
 - ii. Personally explain to you that the Firm is being engaged to represent you on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees are determined and paid;
 - iii. Personally review with you and sign the completed petition, statements, and schedules;
 - iv. Timely prepare and file your petition, statements, and schedules,
 - v. Advise you on which creditors you will need to continue to pay, such as housing or vehicle payments that you intend to retain.
 - b. The fee for services provide before the case is filed is \$0.00.
 - c. The Firm may also incur costs for such items as credit reports and tax transcripts for which it will <u>not</u> seek reimbursement.
- 4. Post-Petition Fees.
 - a. After the case is filed, the Firm agrees to:
 - Advise you of the requirement to attend the meeting of creditors and notify you of the date, time, and place of the meeting;

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Robert B. Wheeler

- ii. Advise you of the requirement to attend a debtor education course and provide a certificate of completion to the Firm;
- iii. Send notice of your case filing to creditors;
- iv. Correspond with creditors regarding any matters necessary for the administration of your case, including to cease payroll garnishments, unfreeze bank accounts, or recover property that was improperly seized by a creditor;
- v. Timely submit to the Chapter 7 trustee properly documented proof of income, tax records as well as any other necessary documentation;
- vi. Provide you with knowledgeable legal representation at the meeting of creditors as well as any continued or rescheduled meetings in time for check-in and examination;
- vii. Timely prepare and file the notice of completion of the debtor education course;
- viii. If the Firm will be employing another attorney to attend the meeting of creditors, personally explain to you, in advance, the role and identity of the other attorneys and provide that attorney with your file in sufficient time to review it and properly represent you at the meeting;
- ix. Timely negotiate with the Trustee regarding any property or actions that the Trustee may pursue that could be adverse to your interests;
- x. Timely prepare, file, and serve any necessary statements, amended statements, amended schedules and any change of address, in accordance with information provided by you;
- xi. Monitor all incoming case information, including but not limited to, Reaffirmation agreements, notice of audits by the US Trustee, correspondence from you or any interested parties;
- xii. Review and negotiate, if necessary, any reaffirmation agreements and personally explain the terms of said agreements to you;
- xiii. Be available to respond to your questions throughout the term of the case;
- xiv. Review and timely respond, if necessary, to Trustee motions to dismiss the case;
- xv. Review and timely respond, if necessary, to motions for relief from stay;
- xvi. Prepare, file, and serve all appropriate motions to avoid liens;
- xvii. Prepare, file, and serve all appropriate motion to redeem;
- xviii. Send In Re Mendiola letters to previously undisclosed creditors; and
- xix. Provide any other legal services necessary for the administration of the case.
- b. The fee for services provide after the case is filed is \$1765.00.
- c. The firm will have no right to payment of the fee listed in section 4(b) unless you sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case.

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Robert B. Wheeler

d. After the case is filed, the Bankruptcy Court will require payment of filing fees in the amount of \$335.00. In order to pay this, you have two (2) options (please circle one):



i. Pay the costs directly to the bankruptcy court either all at once, or apply
 to pay these costs in installments; or

Request that the Firm pay the costs on your behalf for which it will seek reimbursement from you;

- 5. Retainers and Payments to the Firm.
 - a. The fee being charged to you is a flat fee for services rendered during the Chapter 7 case and will be applied without the need for the Firm to keep detailed time records for the specific services performed.
 - b. Any funds paid to the Firm shall immediately become property of the Firm and will be deposited into the operating account of the Firm and will be used for general expenses of the firm.
 - c. While it is ordinarily your option to deposit funds with an attorney that shall remain your property as security for future services, the Firm does not represent clients under such a security retainer because bankruptcy cases require many disparate tasks and functions for the attorneys and support staff; some of which require legal expertise while others may only be ministerial in nature. The benefit to you is the firm's commitment to perform any and all work necessary to represent you in this Chapter 7 bankruptcy.
- 6. Right to Hire New Counsel. You always have the right at any time to terminate the Firm's representation and hire new counsel. Should you refuse to sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case, and the Firm moves to withdraw from representing you, you are strongly encouraged to hire new counsel.
- 7. Conflict Waiver. There is an inherent conflict wherever attorneys represent debtors in bankruptcy for a fee. The Firm is working to alleviate financial issues, while at the same time charging a fee. There have also previously been cases that questioned whether asking you to sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case presents a possible additional conflict of interest. The Firm may only represent you if that representation will not be materially limited by the Firm's own interests. We believe our ability to represent you will not be affected by your ongoing obligation to pay our post-petition fee. By signing this agreement, you are waiving this conflict and are allowing us to represent you. You

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do not have to waive this conflict of interest and can instead choose for the Firm not to represent you. You also have the right to consult separate counsel to discuss whether you should waive this conflict.

8. Merger. This agreement constitutes the entire agreement between you and the Firm. Any previous discussions or agreements are not valid or enforceable unless contained in this document.

Very truly Yours,

Attorney, The Semrad Law Firm

CONFIRMED:

Robert B. Wheeler

05/15/2019

Date